Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
EASTERN DISTRICT OF NEW YORK	=		
Case number (if known)	Chapter you are filing under:		
	■ Chapter 7		
	☐ Chapter 11		
	☐ Chapter 12		
	☐ Chapter 13	_	Check if this an amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Melissa First name  L. Middle name  Tempone Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Melissa L. Rutledge	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8592	

Del	otor 1 Melissa L. Tempo	ne	Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and	Puningga nama(a)	Dusiness name/s)			
	doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		1517 Rhode Avenue Merrick, NY 11566				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Nassau				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing	Check one:	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Deb	tor 1 Melissa L. Tempo	ne				Case number (if known)		
Par	Tell the Court About	our Bank	ruptcy Case					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Chap	ter 7					
		☐ Chap	ter 11					
		☐ Chap						
		☐ Chap						
		<b>—</b> Опар	101 10					
8.	How you will pay the fee	abo	out how you ma	ay pay. Typically, if yourney is submitting your	i are paying the fe	check with the clerk's office in your local court for more yourself, you may pay with cash, cashier's check behalf, your attorney may pay with a credit card or	, or money	
	☐ I need to pay the fee in installments. If you choose this option, sign					option, sign and attach the Application for Individua	als to Pay	
			· ·	Installments (Official F	,	pption only if you are filing for Chapter 7. By law, a ju	udao mov	
		but	is not required	d to, waive your fèe, an	d may do so only	if your income is less than 150% of the official pove the fee in installments). If you choose this option, you	erty line	
		out	the Application	n to Have the Chapter	7 Filing Fee Waiv	red (Official Form 103B) and file it with your petition.		
9.	Have you filed for	<b>=</b> N.						
•	bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.	<b>5</b> 1.1.					
			District		<del></del>	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	■ No.	Go to line 1	2.				
	residence?	☐ Yes.	Has your la	ndlord obtained an evi	ction judgment ag	ainst you and do you want to stay in your residence	e?	
		<b>—</b> 100.	•	Go to line 12.	, g wg	, , , , , , , , , , , , , , , , , , ,		
			_ □ Yes		ent About an Evic	tion Judgment Against You (Form 101A) and file it v	with this	
				,				

Deb	tor 1 Melissa L. Tempo	ne			Case number (if known)		
Par	Report About Any Bu	sinesses	You Owr	າ as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	So to Part 4.			
		☐ Yes.	Name	e and location of bus	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	oer, Street, City, Sta	te & ZIP Code		
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:		
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
				None of the above	e		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadline operation	s. If you i	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	■ No.	I am	not filing under Chap	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
_	D 4444 0						
Par	•		/ Hazardo	ous Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any property that poses or is	■ No.					
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?			
					Number, Street, City, State & Zip Code		

Debtor 1 Melissa L. Tempone Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1:

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Melissa L. Tempo	ne		Case number (if known)						
Par	t 6: Answer These Questi	ions for Re <sub>l</sub>	oorting Purposes							
16.	What kind of debts do you have?		Are your debts primarily connumber of the primarily connumber of the primarily for a personal control of the primarily control of t			ed in 11 U.S.C. § 101(8) as "incurred by an				
			□ No. Go to line 16b.  ■ Yes. Go to line 17.							
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c	State the type of debts you ow	ve that are not consu	ımer debts or business	debts				
17.	Are you filing under Chapter 7?	□ No.	am not filing under Chapter 7	7. Go to line 18.						
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?							
	administrative expenses are paid that funds will		No							
	be available for distribution to unsecured creditors?		□ Yes							
18.	•	<b>1</b> -49		<b>1</b> ,000-5,000	)	□ 25,001-50,000				
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000		50,001-100,000				
		☐ 100-199 ☐ 200-999		☐ 10,001-25,0	000	☐ More than100,000				
19.		□ \$0 - \$50	0,000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?	□ \$50,00°	I - \$100,000	□ \$10,000,00°	1 - \$50 million	□ \$1,000,000,001 - \$10 billion				
	DO HOILIT.		01 - \$500,000 01 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$50	0,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?		1 - \$100,000	\$10,000,00		\$1,000,000,001 - \$10 billion				
			01 - \$500,000 01 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
		<b>—</b> \$500,00	)	<b>—</b> \$100,000,00		— more than 900 billion				
Par	t 7: Sign Below									
For	you	I have exa	mined this petition, and I decla	are under penalty of	perjury that the inform	ation provided is true and correct.				
						under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.				
			ey represents me and I did no I have obtained and read the			an attorney to help me fill out this				
		I request re	elief in accordance with the ch	napter of title 11, Uni	ted States Code, spec	ified in this petition.				
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.								
			sa L. Tempone <sub>-</sub> . Tempone		Signature of Debtor 2	)				
			of Debtor 1		orginature of Debtor 2	-				
		Executed of	on <b>June 24, 2016</b>		Executed on					
			MM / DD / YYYY			DD / YYYY				

Debtor 1 Melissa L. Tempo	one	Case	Case number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, L	Inited States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. §			
If you are not represented by an attorney, you do not need to file this page.		(Ď) applies, certify that I have n	o knowledge after an inquiry that the information			
	/s/ Cooper J Macco	Date	June 24, 2016			
	Signature of Attorney for Debtor		MM / DD / YYYY			
	Cooper J Macco					
	Printed name					
	Macco and Stern, LLP					
	Firm name					
	2950 Express Drive South					
	Suite 109					
	Islandia, NY 11749					
	Number, Street, City, State & ZIP Code					
	Contact phone <b>631-549-7900</b>	Email address				
	Bar number & State					

E:11	n this information to identify your case	<b>.</b>			
		e <del>.</del>			
Deb	or 1 Melissa L. Tempone First Name	Middle Name	Last Name		
Deb		Middle Nove	Lost Nama		
``	. 0,	Middle Name	Last Name		
Unite	ed States Bankruptcy Court for the: EA	ASTERN DISTRICT C	DE NEW YORK		
Case (if kno	e number wn)				c if this is an
				amen	ded filing
	–				
	icial Form 106Sum				
			nd Certain Statistical Information		12/15
infor		irst; then complete t	e are filing together, both are equally responsible he information on this form. If you are filing amer k the box at the top of this page.		
Part	1: Summarize Your Assets				
				Your a	ssets
					of what you own
1.	Schedule A/B: Property (Official Form	106A/B)		\$	435,000.00
					400,000.00
	1b. Copy line 62, Total personal property	y, from Schedule A/B.		\$	12,532.26
	1c. Copy line 63, Total of all property on	Schedule A/B		. \$	447,532.26
Part	2: Summarize Your Liabilities				
				Your li	abilities
					t you owe
2.	Schedule D: Creditors Who Have Claims 2a. Copy the total you listed in Column A		y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D.</i> .	. \$	446,751.51
3.	Schedule E/F: Creditors Who Have Uns			•	7 500 00
	3a. Copy the total claims from Part 1 (p	riority unsecured clain	ns) from line 6e of <i>Schedule E/F</i>	. \$	7,500.00
	3b. Copy the total claims from Part 2 (no	onpriority unsecured of	claims) from line 6j of Schedule E/F	\$	74,191.95
			Your total liabilities	\$   \$	528,443.46
Dort	2: Summarina Vaur Income and Evr				
Part					
4.	Schedule I: Your Income (Official Form Copy your combined monthly income from		e l	. \$	7,256.18
5.	Schedule J: Your Expenses (Official For				
0.				\$	7,136.69
Part	4: Answer These Questions for Adn	ninistrative and Stati	istical Records		
6.	Are you filing for bankruptcy under Cl	hapters 7, 11, or 13?	,		
		-	Check this box and submit this form to the court with y	our other so	chedules.
7.	■ Yes What kind of debt do you have?				
			debts are those "incurred by an individual primarily fo	r a persona	, family, or
		sumer debts. You ha	eve nothing to report on this part of the form. Check the	is box and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Melissa L. Tempone

Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

6,239.33

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	7,500.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	1,628.91
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	9,128.91

	Melissa L. Tem	npone						
	First Name		e Name	Last Name				
Debtor 2 Spouse, if filing)	First Name	Middle	e Name	Last Name				
Jnited States Ba	inkruptcy Court for the	e: EASTERN	DISTRICT OF NEV	V YORK				
Case number _						Ī	☐ Check if this is a	
							amended filing	
Official Fo	rm 106A/B							
Schedul	e A/B: Pro	pertv					12/15	
		<u>. , , , , , , , , , , , , , , , , , , ,</u>	n asset only once. If	an asset fits in more than or	ne category, list the asse	et in the	category where you th	
				filing together, both are equi				
ore space is need	ieu, allacii a separale s	sileet to tills form	i. On the top of any at	aditional pages, write your in	ame and case number (	ii Kilowi	ij. Aliswei every questi	
Part 1: Describe	Each Residence, Build	ing, Land, or Oth	ner Real Estate You O	own or Have an Interest In				
Do you own or h	ave any legal or equita	ble interest in an	ny residence, building	g, land, or similar property?				
☐ No. Go to Part	+ 2							
_								
■ Yes. Where is	s tne property?							
			\A/L =4 != 4L =					
1.1 1517 Rhor	de Avenue			rty? Check all that apply				
	if available, or other descrip	otion	Single-famil	nulti-unit building	Do not deduct secu		ns or exemptions. Put th ns on <i>Schedule D:</i>	
			Condominiu	um or cooperative	Creditors Who Hav	e Claims	Secured by Property.	
				ed or mobile home	Current value of the	ne	Current value of the	
Merrick	NY 1	1566-0000	Land		entire property?		portion you own?	
City	State	ZIP Code	Investment	property	\$435,000	.00	\$435,000.0	
			☐ Timeshare ☐ Other				our ownership interest	
				est in the property? Check one	- 1:64-4-1 :6 1		ncy by the entireties, or	
			Debtor 1 on					
Nassau			Debtor 2 on	ıly				
County			Debtor 1 an	nd Debtor 2 only	- Check if this	is comn	nunity property	
			☐ At least one	e of the debtors and another	(see instructions		idinity property	
				you wish to add about this i	tem, such as local			
			property identifica	ation number:				
		_		s from Part 1, including				

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Deb	otor 1 Melissa L. Tempone	ase number (if known)		
3. <b>C</b>	Cars, vans, trucks, tractors, sport utility	y vehicles, motorcycles		
	l No			
	Yes			
3.1	Make: <b>Honda</b>	Who has an interest in the property? Check one		claims or exemptions. Put ared claims on Schedule D:
	Model: Pilot	Debtor 1 only		laims Secured by Property.
	Year: <b>2009</b>	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: <b>63,000</b> Other information:		entire property?	portion you own?
	Other information.	At least one of the debtors and another		
		Check if this is community property (see instructions)	\$10,500.00	\$10,500.00
E>		s and other recreational vehicles, other vehicles, a al watercraft, fishing vessels, snowmobiles, motorcycle		
		own for all of your entries from Part 2, including a rite that number here		\$10,500.00
	Describe Your Personal and Household			
Do	you own or have any legal or equitable	e interest in any of the following items?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
	Household goods and furnishings Examples: Major appliances, furniture, lin  No ■ Yes. Describe  Misc. House	hold Goods and Furnishings		\$500.00
				<u>-</u>
	Electronics Examples: Televisions and radios; audio, including cell phones, camera  No  Yes. Describe  Misc. Electro		ers, scanners; music colle	ections; electronic devices
Ε	Collectibles of value  Examples: Antiques and figurines; paintin other collections, memorabilia	ngs, prints, or other artwork; books, pictures, or other a ,, collectibles	rt objects; stamp, coin, or	baseball card collections;
	☐ No☐ ☐ Yes. Describe			
<i>E</i>	musical instruments	e, and other hobby equipment; bicycles, pool tables, go	olf clubs, skis; canoes and	kayaks; carpentry tools;
	■ No □ Yes. Describe			
-	Firearms  Examples: Pistols, rifles, shotguns, amm	nunition, and related equipment		
_	No			
_	☐ Yes. Describe			
Offic	cial Form 106A/B	Schedule A/B: Property		page 2

D	ebtor 1 Melissa L. 1	Tempone	9	Case number	(if known)
11.	Clothes  Examples: Everyday c  No  Yes. Describe	lothes, fui	rs, leather coats, de	esigner wear, shoes, accessories	
		Misc.	Wearing Appare	el	\$500.00
12.	. <b>Jewelry</b> Examples: Everyday je □ No ■ Yes. Describe			agement rings, wedding rings, heirloom jewelry, watche	s, gems, gold, silver
		Misc.	Jewelry		\$250.00
13.	. Non-farm animals  Examples: Dogs, cats,  □ No  Yes. Describe		rses		***
		Dog			\$0.00
Pa	for Part 3. Write that	of all of y number	your entries from here	Part 3, including any entries for pages you have atta	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No			nome, in a safe deposit box, and on hand when you file y	our petition
				Cash	\$5.00
17.			ve multiple accoun	counts; certificates of deposit; shares in credit unions, b ts with the same institution, list each.  Institution name:  Nassau Educators Federal Credit Union	
		17.1.	Checking	#8202	\$20.00
		17.2.	Savings	NEFCU/Dollar Kids Savings/Account he with daughter #8701	ld \$100.00
		17.3.	Savings	NEFCU - Acct. #: 8201	\$1.00

D	ebtor 1	Melissa L. T	empone		Case number (if known)	
18.			or publicly traded stocks	rokerage firms, money mai	rket accounts	
	■ No					
	☐ Yes		Institution or issuer	r name:		
19.		ublicly traded s int venture	tock and interests in incorp	porated and unincorporat	ted businesses, including an interest	in an LLC, partnership,
	■ No					
	☐ Yes.	Give specific in	formation about them Name of entity:		% of ownership:	
20.	Negotia	able instrument	porate bonds and other negs include personal checks, cannot transfer those you cannot transfer the second transfer transfer the second transfer transfer the second transfer transfer transfer the second transfer tr	ashiers' checks, promissory	notes, and money orders.	
		Give specific inf	ormation about them			
	<b>□</b> 163.	Oive specific iiii	Issuer name:			
21.	Examp ☐ No	nent or pension  bles: Interests in  List each accou	IRA, ERISA, Keogh, 401(k),	403(b), thrift savings accou	unts, or other pension or profit-sharing p	lans
			Type of account:	Institution name:		
			401(k)	Vanguard		\$406.26
	Your sl		ed deposits you have made s		ervice or use from a company as, water), telecommunications compani	es, or others
	☐ Yes.			Institution name or	individual:	
23.	. Annuiti	ies (A contract f	or a periodic payment of mor	ney to you, either for life or	for a number of years)	
	☐ Yes	ls	ssuer name and description.			
24.			on IRA, in an account in a 6529A(b), and 529(b)(1).	qualified ABLE program,	or under a qualified state tuition prog	ram.
	☐ Yes	lr	nstitution name and description	on. Separately file the reco	rds of any interests.11 U.S.C. § 521(c):	
25.	. Trusts, ■ No	, equitable or fu	uture interests in property (	other than anything listed	d in line 1), and rights or powers exer	cisable for your benefit
	☐ Yes.	Give specific in	formation about them			
26.			rademarks, trade secrets, a main names, websites, proce			
	☐ Yes.	Give specific in	formation about them			
27.	Examp  ■ No	oles: Building pe			ngs, liquor licenses, professional license	5
	☐ Yes.	Give specific in	formation about them			
M	oney or I	property owed	to you?			Current value of the portion you own?  Do not deduct secured

claims or exemptions.

De	btor 1	Melissa L. Tempone	Case number (if known)	
		funds owed to you		
_	■ No □ Yes.	Give specific information about them, including w	whether you already filed the returns and the tax years	
29.		r <b>support</b> oles: Past due or lump sum alimony, spousal supp	port, child support, maintenance, divorce settlement, property	y settlement
	■ No □ Yes.	Give specific information		
	Exam <sub>l</sub>	amounts someone owes you oles: Unpaid wages, disability insurance payments benefits; unpaid loans you made to someone	s, disability benefits, sick pay, vacation pay, workers' compe e else	ensation, Social Security
_	■ No □ Yes.	Give specific information		
_		sts in insurance policies oles: Health, disability, or life insurance; health sa	vings account (HSA); credit, homeowner's, or renter's insura	nce
ı	Yes.	Name the insurance company of each policy and Company name:	l list its value.  Beneficiary:	Surrender or refund value:
		Term Life - Prudential		\$0.00
33. I	Claims Examp	Give specific information  s against third parties, whether or not you have oles: Accidents, employment disputes, insurance  Describe each claim	e filed a lawsuit or made a demand for payment claims, or rights to sue	
I	No	contingent and unliquidated claims of every na  Describe each claim	ature, including counterclaims of the debtor and rights to	o set off claims
		nancial assets you did not already list		
	■ No □ Yes.	Give specific information		
36.			4, including any entries for pages you have attached	\$532.26
Par	t 5: De	scribe Any Business-Related Property You Own or Ha	ave an Interest In. List any real estate in Part 1.	
_		own or have any legal or equitable interest in any busi o to Part 6.	iness-related property?	
_	_	Go to line 38.		
Par		scribe Any Farm- and Commercial Fishing-Related Pr rou own or have an interest in farmland, list it in Part 1.	roperty You Own or Have an Interest In.	
46.	_ `	u own or have any legal or equitable interest in	n any farm- or commercial fishing-related property?	
	_	Go to line 47.		

Debto	Melissa L. Tempone		Case number (if known)	
Part 7:	Describe All Property You Own or Have an Interest in That You D	Did Not List Above		
	you have other property of any kind you did not already list?  camples: Season tickets, country club membership	•		
<b>I</b>	No			
	es. Give specific information			
54. <b>A</b>	dd the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>P</b>	art 1: Total real estate, line 2			\$435,000.00
56. <b>P</b>	art 2: Total vehicles, line 5	\$10,500.00		<u> </u>
57. <b>P</b>	art 3: Total personal and household items, line 15	\$1,500.00		
58. <b>P</b>	art 4: Total financial assets, line 36	\$532.26		
59. <b>P</b>	art 5: Total business-related property, line 45	\$0.00		
60. <b>P</b>	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>P</b>	art 7: Total other property not listed, line 54 +	\$0.00		
62. <b>T</b>	otal personal property. Add lines 56 through 61	\$12,532.26	Copy personal property total	\$12,532.26
63. <b>T</b>	otal of all property on Schedule A/B. Add line 55 + line 62			\$447.532.26

F	I in this inforn	nation to identify your ca	ase:							
De	ebtor 1	Melissa L. Tempon	е							
Do	ebtor 2	First Name	Middle Name	L	ast Name					
	ouse if, filing)	First Name	Middle Name	L	ast Name					
Un	nited States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF N	EW Y	ORK					
_		-								
	nse number (nown)					☐ Check if this is an				
	, 					amended filing				
$\sim$	(() = ! =	1000								
<u>)</u>	fficial Fo	rm 106C								
S	chedule	e C: The Pro	perty You Cla	iim	as Exempt	•	4/16			
Зе	as complete ar	nd accurate as possible. If	two married people are filing	g toge	ether, both are equally responsible f	or supplying correct information.	Using			
he	property you lis	sted on <i>Schedule A/B: Pr</i>	operty (Official Form 106A/B	as y	our source, list the property that you	u claim as exempt. If more space	is			
	eded, fill out and I case number		any copies of Part 2: Addition	nai Pa	age as necessary. On the top of an	y additional pages, write your nar	ne			
or	each item of	property you claim as ex	kempt, you must specify th	e am	ount of the exemption you claim.	One way of doing so is to state	e a			
spe	ecific dollar an	nount as exempt. Altern	atively, you may claim the f	full fa	ir market value of the property be	eing exempted up to the amour	nt of			
					th aids, rights to receive certain mption of 100% of fair market val		ment			
		articular dollar amount a statutory amount.	and the value of the proper	ty is	determined to exceed that amour	nt, your exemption would be lir	nited			
	<u> </u>	•	n as Evennt							
		y the Property You Clair	•							
1.	Which set of	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	☐ You are cla	aiming state and federal n	onbankruptcy exemptions.	11 U.	S.C. § 522(b)(3)					
	You are cla	aiming federal exemptions	s. 11 U.S.C. § 522(b)(2)							
2.	For any prop	For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below.								
	Brief description of the property and line on		n Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	n			
			Copy the value from Schedule A/B							
		e Avenue Merrick, NY	\$435,000.00		\$10,000.00	11 U.S.C. § 522(d)(1)				
	11566 Nass	sau County nedule A/B: 1.1			100% of fair market value, up to					
	Eine nom oor	iodalo 7VB.			any applicable statutory limit					
	2000 Hands	a Pilot 63,000 miles				11 U.S.C. § 522(d)(2)				
		nedule A/B: <b>3.1</b>	\$10,500.00		\$3,775.00	11 0.3.6. § 322(u)(2)				
					100% of fair market value, up to any applicable statutory limit					
		a Pilot 63,000 miles	\$10,500.00		\$1,130.00	11 U.S.C. § 522(d)(5)				
	Line nom Sci	iedule A/B. <b>3.1</b>			100% of fair market value, up to					
					any applicable statutory limit					
		ehold Goods and	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)				
	Furnishings Line from Sch	nedule A/B: <b>6.1</b>			100% of fair market value, up to any applicable statutory limit					
					any applicable statutory littlit					
	Misc. Electi Line from Sch	ronics nedule A/B: <b>7.1</b>	\$250.00		\$250.00	11 U.S.C. § 522(d)(3)				
					100% of fair market value, up to					

Official Form 106C

De	ebtor 1 Melissa L. Tempone			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Misc. Wearing Apparel Line from Schedule A/B: 11.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
	Line Holl Goledale A.B. 1111			100% of fair market value, up to any applicable statutory limit	
	Misc. Jewelry Line from Schedule A/B: 12.1	\$250.00		\$250.00	11 U.S.C. § 522(d)(4)
	Line Horr Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Nassau Educators Federal Credit Union #8202	l \$20.00		\$20.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Savings: NEFCU/Dollar Kids Savings/Account held with daughter	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
	#8701 Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	401(k): Vanguard Line from Schedule A/B: 21.1	\$406.26		\$406.26	11 U.S.C. § 522(d)(10)(E)
	Line Horr Schedule A.B. 2111			100% of fair market value, up to any applicable statutory limit	
	Term Life - Prudential Line from Schedule A/B; 31.1	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
	Line Holl Goldade A.B. 3111			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			filed on or after the date of adjustme	ent )
	■ No	o years after that for e	u000 i	med on or ancer the date or adjustine	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Yes. Did you acquire the property cover	red by the exemption w	ithin 1	215 days before you filed this case	?
	□ No	od by the exemption w		,210 dayo bololo you mou tillo odoo	•
	☐ Yes				

<b>-</b> 111 - 11 - 15 - 11 - 15					
Fill in this information to identify y	our case:				
Debtor 1 Melissa L. Ter	mpone				
First Name	Middle Name Last Na	ame			
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Na	ame	-		
United States Bankruptcy Court for th	ne: EASTERN DISTRICT OF NEW YORK				
			-		
Case number (if known)			Charle	:f +h:= := ==	
(II KHOWH)			_	if this is an	
			amend	ded filing	
Official Form 106D					
	- M/h - Llave Olaima Can	al lass Durana and			
Schedule D: Creditor	s Who Have Claims Secu	ared by Propert	<u>.</u>	12/15	
Be as complete and accurate as possible	. If two married people are filing together, both a	re equally responsible for sup	plying correct information	n. If more space is	
	ut, number the entries, and attach it to this form.	On the top of any additional p	pages, write your name a	nd case number (if	
known).					
1. Do any creditors have claims secured I					
	t this form to the court with your other sched	ules. You have nothing else	to report on this form.		
Yes. Fill in all of the information	n below.				
Part 1: List All Secured Claims					
	s more than one secured claim, list the creditor sepa	rately for Column A	Column B	Column C	
each claim. If more than one creditor has a	a particular claim, list the other creditors in Part 2. As	s much Amount of claim	Value of collateral	Unsecured	
as possible, list the claims in alphabetical of	order according to the creditor's name.	Do not deduct the	that supports this	portion	
2.1 NEFCU	Describe the property that secures the claim	value of collateral. : \$1,497.36	claim \$10,500.00	If any <b>\$0.00</b>	
Creditor's Name	2009 Honda Pilot 63,000 miles			Ψσ.σσ	
	2000 1101144 1 1101 00,000 1111100				
1000 Corporate Drive					
PO Box 9003	As of the date you file, the claim is: Check all t apply.	hat			
Westbury, NY 11590-9003	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgage	or secured			
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	ien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	- /			
☐ Check if this claim relates to a	Other (including a right to offset) Car Le	oan			
community debt					
Date debt was incurred	Last 4 digits of account number 8	202			
		202			
O O DILLI Montrono	D		¢425 000 00	\$40.0E4.4E	
2.2 PHH Mortgage Creditor's Name	Describe the property that secures the claim	± \$445,254.15	\$435,000.00	\$10,254.15	
Oreditor 3 Name	1517 Rhode Avenue Merrick, NY 11566 Nassau County				
	11300 Nassau County				
1 Mortgage Way	As of the date you file, the claim is: Check all t	hat			
Mount Laurel, NJ 08054	apply. ☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
, , , , , , , , , , , , , , , , , , , ,	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as mortgage	or secured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	ien)			
☐ At least one of the debtors and another	<u> </u>	:=::,			
☐ Check if this claim relates to a	Other (including a right to offset)	age			
community debt	— Other (mordaling a right to offset)	• =			
Date debt was incurred	Last 4 digits of account number 3	3740			

Official Form 106D

Debtor 1	Melissa L. Temp	oone		Case number (if know)	
	First Name	Middle Name	Last Name		
					_
Add the	dollar value of your er	ntries in Column A on	this page. Write that number here:	\$446,751.5°	1
	the last page of your f at number here:	form, add the dollar v	alue totals from all pages.	\$446,751.5°	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Fill	in this information to identify you	ır case:					
Del	otor 1 Melissa L. Temp						
Dal	First Name	Middle Name	Last Nan	ne			
	otor 2  puse if, filing)  First Name	Middle Name	Last Nan	ne			
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF NEW YORK				
Cas	se number						
	nown)					_	if this is an led filing
∩ff	ficial Form 106E/F						-
	hedule E/F: Creditors	Who Have Unsec	ured Claim	16			12/15
any o Sche D: C the O num	s complete and accurate as possible. Lexecutory contracts or unexpired lease edule G: Executory Contracts and Unexpeditors Who Have Claims Secured by Continuation Page to this page. If you her (if known).	s that could result in a claim. pired Leases (Official Form 1 Property. If more space is ne ave no information to report	Also list executor 106G). Do not inclu eded, copy the Par	ry contracts de any cred t you need,	on Schedule A/B: Pro litors with partially sec fill it out, number the	perty (Official Form cured claims that are entries in the boxes	106A/B) and on listed in Schedule on the left. Attach
	List All of Your PRIORITY						
١.	Do any creditors have priority unsecur  ☐ No. Go to Part 2.	eu ciainis against you?					
	Yes.						
	possible, list the claims in alphabetical or 1. If more than one creditor holds a partic (For an explanation of each type of claim	cular claim, list the other credito	rs in Part 3.		Total claim	Priority amount	Nonpriority amount
2.1	Internal Revenue Service	Last 4 digits of	of account number		\$7,500.00	\$7,500.00	\$0.00
	Priority Creditor's Name PO Box 219690	When was the	e debt incurred?	2014		·	
	Kansas City, MO 64121-96		van fila the eleim	in Charles	all that apply		
	Number Street City State Zlp Code Who incurred the debt? Check one.	☐ Contingent	you file, the claim	is: Check a	ш тат арріу		
	■ Debtor 1 only	☐ Unliquidate					
	Debtor 2 only	☐ Disputed	au .				
	Debtor 1 and Debtor 2 only		RITY unsecured cla	aim·			
	☐ At least one of the debtors and anot	<u></u> -	support obligations				
	_	_		vous ausa the a	and to the manual of		
	LI Check if this claim is for a comm Is the claim subject to offset?	=	certain other debts death or personal in				
	No	☐ Other. Spe		jury write ye	d were intoxicated		
	☐ Yes	□ Other. Spe	Tax Lien				
Do	List All of Vous NONDRION	NTV III a a a suma d Claima					
	List All of Your NONPRIOR  Do any creditors have nonpriority uns						
J.	☐ No. You have nothing to report in this		ourt with your other s	chedules.			
	Yes.						
4.	List all of your nonpriority unsecured claim, list the creditor separately for each creditor holds a particular claim, list the creditor holds a particular claim, list the creditor holds a particular claim.	claim. For each claim listed, id	lentify what type of o	laim it is. Do	not list claims already	included in Part 1. If n	nore than one

Total claim

Melissa L. Tempone		Case number (if know)	
Amazon/Synchrony Bank	Last 4 digits of account number	0102	\$3,331.40
Nonpriority Creditor's Name PO Box 960013	When was the debt incurred?	2012-2016	
Orlando, FL 32896-0013  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
■ Debtor 1 only	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	I claim:	
☐ At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
American Education	Last 4 digits of account number	2177	\$1,628.91
Nonpriority Creditor's Name Services Payment Center Harrisburg, PA 17130-0001	When was the debt incurred?	1994	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
■ Debtor 1 only	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
☐ At least one of the debtors and another	Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify		
	Student Lo	an	
American Express Nonpriority Creditor's Name	Last 4 digits of account number	1001	\$958.35
PO Box 1270 Newark, NJ 07101-1270	When was the debt incurred?	2016	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
☐ Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
☐ At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Credit Card	i	

Debto	Melissa L. Tempone		Case number (if know)				
4.4	Bank of America	Last 4 digits of account number	5468	\$3,541.65			
	Nonpriority Creditor's Name PO Box 15019 Wilmington, DE 10006 5010	When was the debt incurred?	2012-2016				
	Wilmington, DE 19886-5019  Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:				
	At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.5	Barclaycard	Last 4 digits of account number	9967	\$3,862.82			
	Nonpriority Creditor's Name  Card Services	When was the debt incurred?	2012-2016				
	PO Box 13337	mon nao ino dobi mountou.	2012-2010				
	Philadelphia, PA 19101-3337						
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:				
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	Is the claim subject to offset?						
	■ No	Debts to pension or profit-sharing					
	Yes	■ Other. Specify Credit Card	<u>d</u>				
4.6	Bechtle & Murphy	Last 4 digits of account number		\$21,061.00			
	Nonpriority Creditor's Name 300 Garden City Plaza	When was the debt incurred?	2009-2016				
	Suite 314	When was the dest mounted.	2009-2010				
	Garden City, NY 11530						
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:  ☐ Student loans					
	☐ At least one of the debtors and another						
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims	and the second s				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other Specify Legal Fees	/Divorce Atty				

Debto	<sup>1</sup> Melissa L. Tempone		Case number (if know)				
4.7	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	2293	\$9,782.95			
	PO Box 71083 Charlotte, NC 28272-1083	When was the debt incurred?	2012-2016				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.  ■ Debtor 1 only  □ Debtor 2 only	☐ Contingent☐ Unliquidated☐					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	l claim:				
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	1				
4.8	Citi Cards	Last 4 digits of account number	5897	\$8,136.48			
	Nonpriority Creditor's Name PO Box 6004 Sioux Falls, SD 57117-6004	When was the debt incurred?	2012-2016				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	•	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured					
	$\square$ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	No	Debts to pension or profit-sharin					
	Yes	Other. Specify Credit Card					
4.9	Gap/Synchrony Bank	Last 4 digits of account number	8376	\$2,533.08			
	Nonpriority Creditor's Name PO Box 530942	When was the debt incurred?	2012-2016				
	Atlanta, GA 30353-0942  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	_					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured					
	☐ At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	■ Other. Specify Credit Card	I				

Debto	r 1 Melissa L. Tempone		Case number (if know)	
4.10	NEFCU	Last 4 digits of account number	8204	\$973.52
	Nonpriority Creditor's Name 1000 Corporate Drive PO Box 9003	When was the debt incurred?	2015-2016	
	Westbury, NY 11590-9003  Number Street City State Zlp Code	A a of the data way file the alaim i	as Chapte all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim i	s: Cneck all that apply	
	Debtor 1 only	☐ Contingent		
		☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Overdrawn	Checking Account	
4.11	NEFCU	Last 4 digits of account number	8203	\$5,607.22
	Nonpriority Creditor's Name 1000 Corporate Drive PO Box 9003	When was the debt incurred?	2012	
	Westbury, NY 11590-9003			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Loan		
4.12	NEFCU/Visa	Last 4 digits of account number	8478	\$8,966.19
	Nonpriority Creditor's Name PO Box 37603	When was the debt incurred?	2015-2016	
	Philadelphia, PA 19101-0603  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	_	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
			5 i	
	☐ Yes	■ Other. Specify Credit Card	J.	

or 1 Melissa L. Tempone		Case number (if know)					
Slate from Chase	Last 4 digits of account number	9649	\$3,808.38				
Nonpriority Creditor's Name							
Cardmember Service	When was the debt incurred?	2012-2016					
PO Box 15153 Wilmington, DE 19886							
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply					
Who incurred the debt? Check one.	По п						
■ Debtor 1 only	☐ Contingent	_					
Debtor 2 only	Unliquidated						
	☐ Disputed	☐ Disputed					
☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim:					
$\square$ At least one of the debtors and another	☐ Student loans						
☐ Check if this claim is for a community do Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
Yes	■ Other. Specify Credit Care	d					

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 7,500.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 7,500.00
				Total Claim
	6f.	Student loans	6f.	\$ 1,628.91
otal claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 72,563.04
	6i.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 74,191.95

Fill in this infor	rmation to identify your	case:		
Debtor 1	Melissa L. Tempo	one		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK	
Case number				
(if known)				

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4	City		Otate	Zii Code	
2.7	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Fill in this inf	ormation to identify you	ur case:			
Debtor 1	Melissa L. Tem	-			
Dahtan O	First Name	Middle Name	Last Name		
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States	Bankruptcy Court for the	EASTERN DISTRICT O	F NEW YORK		
Case number				_	
if known)					☐ Check if this is an amended filing
Official F	orm 106H				Ç
	e H: Your Co	debtors			12/15
our name and	d case number (if know	he boxes on the left. Attacl vn). Answer every question (If you are filing a joint case,		. •	p of any Additional Pages, write
■ No □ Yes					
		rou lived in a community pr na, Nevada, New Mexico, Pu			ty states and territories include
■ No. Go		, , , , , , , , , , , , , , , , , ,		9.0,	,
		oouse, or legal equivalent live	e with you at the time?		
in line 2 a Form 106 fill out Co	ngain as a codebtor onl D), Schedule E/F (Offic Dlumn 2.	y if that person is a guaran	ntor or cosigner. Make	e sure you have listed t 106G). Use Schedule D	ng with you. List the person show the creditor on Schedule D (Offic , Schedule E/F, or Schedule G to
	umn 1: Your codebtor e, Number, Street, City, State and	d ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	e
Name	e			☐ Schedule E/F,	
				☐ Schedule G, lin	e
Num	ber Street	State	ZIP Code	_	
3.2				☐ Schedule D, lin	e
Name	e			□ Schedule E/F,	
				☐ Schedule G, lin	
Num	ber Street			<u> </u>	
City		State	ZIP Code		

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						1				
	in this information to identify btor 1 Melissa	your case: a L. Tempone								
	btor 2  puse, if filing)	·								
Uni	ited States Bankruptcy Court	for the: _EASTERN DISTRICT	OF NEW YORK							
	se number nown)		-				imende ippleme	nt showin	g postpetition	
$\cap$	fficial Form 106I								ollowing date:	
	chedule I: Your	Incomo				MM	/ DD/ Y	YYY		12/15
sup spo atta	plying correct information. ouse. If you are separated ar	s possible. If two married per If you are married and not fill nd your spouse is not filing wat form. On the top of any addit ment	ing jointly, and your rith you, do not inclu	spouse	is liv mati	ing with yo	ou, incl our spo	ude infor ouse. If m	mation abou ore space is	t your needed,
1.	Fill in your employment information.		Debtor 1			D	ebtor 2	or non-fi	ling spouse	
	If you have more than one job, attach a separate page with information about additional		■ Employed	■ Employed			] Emplo	yed		
			☐ Not employed				Not er	mployed		
	employers.	Occupation	Marketing Asso	Marketing Associate						
	Include part-time, seasonal self-employed work.	, or Employer's name	OpenLink							
	Occupation may include stu or homemaker, if it applies.				1502 RXR Plaza Uniondale, NY 11556					
		How long employed t	here? 4 yrs							
Pai	rt 2: Give Details Abou	ut Monthly Income								
	imate monthly income as of use unless you are separated	the date you file this form. If	you have nothing to	report for	any	line, write \$	0 in the	space. In	clude your no	on-filing
	ou or your non-filing spouse hate space, attach a separate sh	ave more than one employer, cheet to this form.	ombine the information	on for all e	empl	oyers for the	at perso	on on the I	ines below. If	you need
						For Debto	r 1		otor 2 or ng spouse	
2.	List monthly gross wages deductions). If not paid mo	s, salary, and commissions (but nthly, calculate what the month	pefore all payroll aly wage would be.	2.	\$	5,86	8.04	\$	N/A	
3.	Estimate and list monthly	overtime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income.	Add line 2 + line 3.		4.	\$	5,868.	04	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debt	tor 1	Melissa L. Tempone		Case	number (if known)			
				Fo	r Debtor 1		Debtor 2 or filing spouse	
	Cop	by line 4 here	4.	\$	5,868.04	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,537.03	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	293.41	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	
	5e.	Insurance	5e.	\$_	212.67	\$	N/A	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	
	5g. 5h.	Union dues Other deductions, Specific	5g. 5h.+	\$_ \$	0.00	\$ + \$	N/A N/A	
_		Other deductions. Specify:		· —		· : —		
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	2,043.11	\$	N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	3,824.93	\$	N/A	
8.	List 8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				•		
	O.L.	monthly net income.	8a.	\$_	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$_	3,431.25	\$	N/A	
	8d.	Unemployment compensation	8d.	\$_ \$	0.00	\$	N/A	
	8e. 8f.	Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental	8e. nce	Ψ_	0.00	Φ	N/A	
		Nutrition Assistance Program) or housing subsidies.						
		Specify:	8f.	\$_	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$_	0.00	+ \$	<u>N/A</u>	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,431.25	\$	N/A	
10.		culate monthly income. Add line 7 + line 9.  I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		7,256.18 + \$_		N/A = \$ 7,256	.18
11.	Incli othe Do	te all other regular contributions to the expenses that you list in <i>Schedu</i> ude contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are noticity:	ur depen		•			.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Cerllies					12. \$ <b>7,256</b>	.18
							Combined monthly incom	ne
13.		you expect an increase or decrease within the year after you file this for No	m?					

Official Form 106I Schedule I: Your Income page 2

Yes. Explain: Debtor anticipates ex-husband will seek a reduction of child support based on his lower income.

Fill in this	information to identify w	our case:			1			
	information to identify y				<u> </u>	l · "	Alaia ia.	
Debtor 1	Melissa L. T	empone			Ch		this is: amended filing	
Debtor 2						A s	upplement show	ving postpetition chapter
(Spouse, if	filing)					13 (	expenses as of	the following date:
United State	es Bankruptcy Court for the	: EASTER	RN DISTRICT OF NEW Y	ORK		MM	/ DD / YYYY	
Case numb (If known)	er							
Officia	al Form 106J							
Sche	dule J: Your	Expen	ses					12/1
Be as cor	mplete and accurate as	s possible. eeded, atta	If two married people and the control of the contro					
Part 1:	Describe Your House	ehold						
	is a joint case? o. Go to line 2.							
	es. <b>Does Debtor 2 live</b>	in a separa	ate household?					
	□ No	•						
	☐ Yes. Debtor 2 mu	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate Hous	ehold of D	ebtor	2.	
2. <b>Do y</b>	ou have dependents?	□ No						
	ot list Debtor 1 Debtor 2.	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	ot state the andents names.			Son			9	□ No ■ Yes
				Daughter			10	□ No ■ Yes
				Dauginei				■ Yes □ No
								☐ Yes
								□ No
3. <b>Do y</b>	our expenses include		No					☐ Yes
	enses of people other to self and your depende	than 🗖	Yes					
Estimate	as of a date after the	our bankru	y Expenses iptcy filing date unless y y is filed. If this is a supp					
the value			government assistance i luded it on <i>Schedule I:</i> Y				Your expo	enses
•	,				_			
	rental or home owners nents and any rent for the		ses for your residence. I r lot.	nclude first mortgag	e 4.	\$_		0.00
If no	t included in line 4:							
4a.	Real estate taxes				4a.	\$		0.00
4b.	Property, homeowner				4b.	. —		0.00
4c.	Home maintenance, re				4c.			150.00
4d.	Homeowner's associa		dominium dues Jur residence, such as ho	me equity loans	4d.	\$ —		0.00

Deb	tor 1	Melissa L. Tempone	Case num	ber (	if known)
6.	Utilit	ies:			
-	6a.	Electricity, heat, natural gas	6a.	\$	186.00
	6b.	Water, sewer, garbage collection	6b.	\$	35.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	230.00
	6d.	Other. Specify: Cell Phone	6d.	\$	220.00
		Alarm System	<del></del>	\$	85.00
7.	Food	I and housekeeping supplies			1,225.00
8.		dcare and children's education costs	8.	\$	540.00
9.		ning, laundry, and dry cleaning	9.	\$	250.00
		onal care products and services	10.		100.00
11.		cal and dental expenses	11.		250.00
		sportation. Include gas, maintenance, bus or train fare.		Ψ	230.00
12.		ot include car payments.	12.	\$	300.00
13.		rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
		itable contributions and religious donations	14.	\$	75.00
		rance.			
		ot include insurance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insurance	15a.	\$	0.00
	15b.	Health insurance	15b.	\$	67.00
	15c.	Vehicle insurance	15c.	\$	173.54
	15d.	Other insurance. Specify:	15d.	\$	0.00
16.	Taxe	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Spec		16.	\$	0.00
17.	Insta	Illment or lease payments:			
	17a.	Car payments for Vehicle 1	17a.	\$	190.13
	17b.	Car payments for Vehicle 2	17b.	\$	0.00
	17c.	Other. Specify: Student Loan	17c.	\$	93.02
	17d.	Other. Specify: IRS Payment Plan	17d.	\$	117.00
18.		payments of alimony, maintenance, and support that you did not report as	 i		
		icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
19.	Othe	r payments you make to support others who do not live with you.		\$	0.00
	Spec		19.		
20.		r real property expenses not included in lines 4 or 5 of this form or on Sche			
		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.		0.00
		Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenance, repair, and upkeep expenses	20d.		0.00
	20e.	Homeowner's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify: Misc. Pet & Vet Expenses	21.	+\$	200.00
	Anti	cipated Rental Expense		+\$	2,500.00
00		· · · · · · · · · · · · · · · · · · ·			
22.		ulate your monthly expenses		١,	7 400 00
		Add lines 4 through 21.		5	
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		9	
	22c.	Add line 22a and 22b. The result is your monthly expenses.		9	7,136.69
23	Calc	ulate your monthly net income.			
25.		Copy line 12 (your combined monthly income) from Schedule I.	23a.	Φ	7,256.18
		Copy your monthly expenses from line 22c above.	23b.		7,236.16
	230.	Copy your monthly expenses from line 220 above.	230.	-φ	7,130.09
	23c	Subtract your monthly expenses from your monthly income.			
	_00.	The result is your <i>monthly net income</i> .	23c.	\$	119.49
24.	Do y	ou expect an increase or decrease in your expenses within the year after yo	ou file this	s for	m?
	For ex	cample, do you expect to finish paying for your car loan within the year or do you expect your n			
	_	ication to the terms of your mortgage?			
	■ Ye	es. Explain here: <b>Debtor anticipates relocating within 90 days.</b>			

Fill in this i	information to identify your	case:			
Debtor 1	Melissa L. Tempo				
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
Case numb	er			☐ Check if this is an amended filing	
	Form 106Dec ration About a	n Individual	Debtor's Sche	edules 12/1:	5_
obtaining m		n connection with a bank		flaking a false statement, concealing property, or fines up to \$250,000, or imprisonment for up to 20	)
Did yo	ou pay or agree to pay some	one who is NOT an attorn	ney to help you fill out bank	skruptcy forms?	
■ N	0				
□ Y	es. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119	
	penalty of perjury, I declare ey are true and correct.	that I have read the sumr	nary and schedules filed w	with this declaration and	
	Melissa L. Tempone		X		
	elissa L. Tempone gnature of Debtor 1		Signature of Deb	ebtor 2	
Da	te _ <b>June 24, 2016</b>		Date		

Official Form 106Dec

No Ves. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 lived there  Debtor 2 Prior Address: Dates Debtor 2 lived there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income	Fill	in this infor	mation to identify you	r case:				
Debtor 2   Separes R. Birg)   Frist Name   Middle Name   Last Name	Del	btor 1	Melissa L. Temp	one				
United States Bankruptcy Court for the:  EASTERN DISTRICT OF NEW YORK    Case number	Dal	htor O	First Name	Middle Name		Last Name		
Case number   Check if this is an amended filling   Check if this is an amended filling    Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy   4/16  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before    1. What is your current marital status?   Married   Not married    2. During the last 3 years, have you lived anywhere other than where you live now?    No   Yes. List all of the places you lived in the last 3 years. Do not include where you live now.    Debtor 1 Prior Address: Dates Debtor 1   Debtor 2 Prior Address: Dates Debtor 2   lived there    No   What is a years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, Cellfornia, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No   Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2   Explain the Sources of Your Income    Debtor 1   Sources of income   Gross income   Check all that apply.    No   Yes. Fill in the details.    Debtor 1   Sources of income   Gross income   Check all that apply.   George deductions and exclusions)    Property of the date you filed for bankruptcy:    No   Wages, commissions,   S11,333.32   Wages, commissions,   Donuses, tips			First Name	Middle Name		Last Name		
Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  Be accomplete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married   Not	Uni	ited States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF NEW Y	YORK		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  No   Yes. List all of the places you lived anywhere other than where you live now?  Petro 1 Prior Address: Dates Debtor 1   Debtor 2 Prior Address: Dates Debtor 2 lived there    States and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No   Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2   Explain the Sources of Your Income  1. Debtor 1   Debtor 2   Debtor 2   Debtor 2   Debtor 2   Debtor 2   Debtor 3   Debtor 4   Debtor 4   Debtor 5   Debtor 5   Debtor 6   Debtor 6   Debtor 7   Debtor 7   Debtor 7   Debtor 8   Debtor 9   Debt	Ca	se number						
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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  Not married  During the last 3 years, have you lived anywhere other than where you live now?  Part 2: Dates Debtor 1 prior Address:  Dates Debtor 2 lived there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Artzona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No  Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  Explain the Sources of Your Income  Till in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Check all that	∩f	ficial Ec	vrm 107					
Information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:   Give Details About Your Marital Status and Where You Lived Before				Affairs for Indivi	iduals	Filing for B	ankruptcy	4/16
What is your current marital status?   Married   Not married	info nun	rmation. If r	more space is needed, n). Answer every ques	attach a separate sheet t stion.	to this fo	rm. On the top of an		
During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 Ilived there Debtor 2 Prior Address: Dates Debtor 2 Ilived there Debtor 2 Prior Address: Dates Debtor 2 Ilived there Debtor 3 Prior Address: Dates Debtor 2 Ilived there Debtor 4 Prior Address: Dates Debtor 2 Ilived there Debtor 5 Prior Address: Dates Debtor 6 Prior Address: Dates Debtor 7 Prior Address: Dates Debtor 7 Prior Address: Dates Debtor 9 Prior A	1.							
During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 Ilived there Debtor 2 Prior Address: Dates Debtor 2 Ilived there Debtor 2 Prior Address: Dates Debtor 2 Ilived there Debtor 3 Prior Address: Dates Debtor 2 Ilived there Debtor 4 Prior Address: Dates Debtor 2 Ilived there Debtor 5 Prior Address: Dates Debtor 6 Prior Address: Dates Debtor 7 Prior Address: Dates Debtor 7 Prior Address: Dates Debtor 9 Prior A		□ Marrie	4					
No		_						
Debtor 1 Prior Address:  Dates Debtor 1   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 3    Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No  Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2   Explain the Sources of Your Income  Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Check all that apply.  Debtor 2  Sources of income Check all that apply.  Check all that apply.  Sources of income Check all tha	2.	During the	last 3 years, have you	lived anywhere other tha	n where	you live now?		
Debtor 1 Prior Address:  Dates Debtor 1   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 3    Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No  Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2   Explain the Sources of Your Income  Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Check all that apply.  Debtor 2  Sources of income Check all that apply.  Check all that apply.  Sources of income Check all tha		■ No						
lived there		_	st all of the places you I	ived in the last 3 years. Do	not inclu	de where you live nov	V.	
No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Ves. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips		Debtor 1 P	rior Address:		1	Debtor 2 Prior Ad	dress:	
□ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  □ No ■ Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  □ Wages, commissions, bonuses, tips	<b>3.</b> stat							
Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Did you have any income employment or from operating a business during this year or the two previous calendar years?  For Debtor 1  Sources of income (before 2  Sources of income (before deductions and exclusions)  Wages, commissions, bonuses, tips		■ No						
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips		☐ Yes. M	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (	Official F	orm 106H).		
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Pettor 1 Sources of income Check all that apply.  Prom January 1 of current year until the date you filed for bankruptcy:  From January 1 of current year until the date you filed for bankruptcy:  From January 1 of current year until the date you filed for bankruptcy:  From January 1 of current year until the date you filed for bankruptcy:  From January 1 of current year until year until the date you filed for bankruptcy:  From January 1 of current year until year until year until the date you filed for bankruptcy:  From January 1 of current year until you receive together, list it only once under Debtor 1.  Debtor 2 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  Wages, commissions, bonuses, tips	Pa	rt 2 Expla	in the Sources of You	r Income				
Test. Fill in the details.  Debtor 1 Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$11,333.32  Wages, commissions, bonuses, tips  Sources of income (before deductions and exclusions)	4.	Fill in the tot	al amount of income yo	u received from all jobs an	d all busir	nesses, including part	t-time activities.	endar years?
Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$11,333.32  Wages, commissions, bonuses, tips		_	Il in the details.					
Check all that apply.  (before deductions and exclusions)  Check all that apply.  (before deductions and exclusions)  Check all that apply.  (before deductions and exclusions)  The date you filed for bankruptcy:  State of the deductions and exclusions and exclusions.  State of the deductions and exclusions.  State of the deductions and exclusions.  State of the deductions and exclusions.  Check all that apply.  State of the deductions and exclusions.  State of the deductions and exclusions.  Check all that apply.  State of the deductions and exclusions.  State of the deductions and exclusions.  State of the deductions and exclusions.  Check all that apply.  State of the deductions and exclusions.				Debtor 1			Debtor 2	
the date you filed for bankruptcy:  bonuses, tips  bonuses, tips					(befo	ore deductions and		(before deductions
☐ Operating a business ☐ Operating a business				_		\$11,333.32		
				☐ Operating a business			☐ Operating a business	

Official Form 107

					e number (if known)			
		Debtor 1		Debtor 2				
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
For last calendar year: (January 1 to December 31, 2015)		■ Wages, commissions, bonuses, tips	\$36,625.00	☐ Wages, commission bonuses, tips	ons,			
		☐ Operating a business		☐ Operating a busine	ess			
Include inc unemployr gambling a	come regardless of wh ment, and other public and lottery winnings. If	me during this year or the two ether that income is taxable. Ex- benefit payments; pensions; rer you are filing a joint case and you not prome the source separa	amples of other income are a ntal income; interest; dividend ou have income that you rece	alimony; child support; Sods; money collected from eived together, list it only	n lawsuits; royalties; and			
_	Fill in the details.							
		Debtor 1		Debtor 2				
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)			
	y 1 of current year un filed for bankruptcy:	til Child Support & Maintenance	\$15,792.00					
For last calen (January 1 to	ndar year: December 31, 2015 )	Child Support & Maintenance	\$25,584.00					
	Debtor 1's or Debtor Neither Debtor 1 no	ou Made Before You Filed for r 2's debts primarily consume r Debtor 2 has primarily consu	r debts? umer debts. Consumer debts	s are defined in 11 U.S.C	C. § 101(8) as "incurred by a			
□ No.	individual primarily fo	a personal, family, or household purpose."						
	individual primarily to	r a personal, ranning, or neuserio	ia parpose.					
	During the 90 days be	efore you filed for bankruptcy, di		I of \$6,425* or more?				
	During the 90 days b	efore you filed for bankruptcy, di e 7.	id you pay any creditor a tota	. ,				
	During the 90 days by Solution No. Go to line  Yes List below paid that not include	efore you filed for bankruptcy, di	id you pay any creditor a tota id a total of \$6,425* or more ints for domestic support oblights bankruptcy case.	in one or more payments gations, such as child su	pport and alimony. Also, do			
□ No.	During the 90 days b  No. Go to line  Yes List below paid that not inclue  * Subject to adjustm  Debtor 1 or Debtor 2	efore you filed for bankruptcy, di e 7. w each creditor to whom you pai creditor. Do not include paymer de payments to an attorney for tl	id you pay any creditor a total data total of \$6,425* or more ints for domestic support oblighis bankruptcy case. s after that for cases filed on umer debts.	in one or more payments gations, such as child su or after the date of adju	pport and alimony. Also, do			
□ No.	During the 90 days b  No. Go to line  Yes List below paid that not inclue  * Subject to adjustm  Debtor 1 or Debtor 2	efore you filed for bankruptcy, di e 7. w each creditor to whom you pai creditor. Do not include paymer de payments to an attorney for the ent on 4/01/19 and every 3 year 2 or both have primarily consulter efore you filed for bankruptcy, di	id you pay any creditor a total data total of \$6,425* or more ints for domestic support oblighis bankruptcy case. s after that for cases filed on umer debts.	in one or more payments gations, such as child su or after the date of adju	pport and alimony. Also, do			
□ No.	During the 90 days by No. Go to line  Yes List below paid that not inclue to adjust the subject to adjust the	efore you filed for bankruptcy, di e 7. w each creditor to whom you pai creditor. Do not include paymer de payments to an attorney for the ent on 4/01/19 and every 3 year 2 or both have primarily consulter efore you filed for bankruptcy, di	id you pay any creditor a total id a total of \$6,425* or more in the for domestic support oblighis bankruptcy case. It is after that for cases filed on the company any creditor a total id a total of \$600 or more and i	in one or more payments gations, such as child support or after the date of adjust of \$600 or more?	pport and alimony. Alsó, do stment. aid that creditor. Do not			

Der	ivienssa L. Tempone		Cas	e Hullibei (# known)				
	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.							
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment		
	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	any property on a	ccount of a del	ot that benefited an		
	■ No							
	Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credite			
Par	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures						
	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.							
	□ No							
	Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of the case			
	PHH Mortgage Corp. v. Stephen Tempone, Melissa Tempone, et al. 16-003396	Foreclosure	Supreme Court, Nassau County Supreme Court Drive Mineola, NY 11501		■ Pending □ On appeal □ Concluded			
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below.  No. Go to line 11.		erty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?		
	Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Property		Date	Date Value of th propert			
		Explain what happened	t			р. оро. зу		
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed  No  Yes. Fill in the details.		luding a bank or fil	nancial institution	า, set off any ar	mounts from your		
	Creditor Name and Address	Describe the action the			e action was Amount en			
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  No Yes		erty in the possess	ion of an assigne	e for the benef	it of creditors, a		

De	otor 1 Melissa L. Tempone		Case numbe	(if known)			
Pai	t 5: List Certain Gifts and Contributions	<b>;</b>					
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No						
	Yes. Fill in the details for each gift.	_	<b>-</b>				
	Gifts with a total value of more than \$600 per person	)	Describe the gifts	Dates you gave the gifts	Value		
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No						
	Yes. Fill in the details for each gift or co	ontribut	tion.				
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value		
Pai	t 6: List Certain Losses						
15.	disaster, or gambling?  No Yes. Fill in the details.	otcy or	since you filed for bankruptcy, did you lose an	ytning because of the	rt, fire, other		
	how the loss occurred	nclude	be any insurance coverage for the loss the amount that insurance has paid. List g insurance claims on line 33 of Schedule A/B:	Date of your loss	Value of property lost		
Pai	t7: List Certain Payments or Transfers						
	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.  No  Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred	Date payment or transfer was made	Amount of payment		
	Macco & Stern, LLP 2950 Express Drive South Suite 109 Islandia, NY 11749	ou -	For services rendered in connection with this instant filing \$1,250.00. Filing fee \$335.00. See 2016(b) Statement attached.		\$0.00		
17.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that you have a not include any payment or transfe	itors o		or transfer any prope	rty to anyone who		
			Description and value of any property	Data normant	Amaunt of		
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was	Amount of payment		

Del	otor 1 Melissa L. Tempone	Ca	ase number (if known)				
18.	Within 2 years before you filed for bankruptcy, d transferred in the ordinary course of your busine include both outright transfers and transfers made a include gifts and transfers that you have already list No  Yes. Fill in the details.	ess or financial affairs? as security (such as the granting of a se					
	Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made			
	Melissa Tempone 1517 Rhode Ave. Merrick, NY 11566	Cash out 401K in \$33,000 less tax liability - Net \$19,000	Living Expenses	12/14 and 1/15			
	self						
19.	Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protecti ■ No □ Yes. Fill in the details.		If-settled trust or similar device	of which you are a			
	Name of trust	Description and value of the proper	ty transferred	Date Transfer was made			
Par	t 8: List of Certain Financial Accounts, Instrum	ments, Safe Deposit Boxes, and Stora	age Units				
20.	<ul> <li>Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, clossold, moved, or transferred?</li> <li>Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, broke houses, pension funds, cooperatives, associations, and other financial institutions.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>						
		st 4 digits of Type of account count number instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing o transfe			
21.	Do you now have, or did you have within 1 year	before you filed for bankruptcy, any s	safe deposit box or other deposi	tory for securities,			

cash, or other valuables?

No

☐ Yes. Fill in the details.

Name of Financial Institution

Address (Number, Street, City, State and ZIP Code)

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

■ No

☐ Yes. Fill in the details.

Name of Storage Facility

Address (Number, Street, City, State and ZIP Code)

Who else has or had access to it?

Address (Number, Street, City, State and ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Describe the contents have it?

Par	t 9: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty you borrowed from, are storing fo	or, or hold in trust				
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Par	t 10: Give Details About Environmental Inform	nation						
For	the purpose of Part 10, the following definition	s apply:						
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, grour						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	_	law, whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	nmental law defines as a hazardou	s waste, hazardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	en they occurred.					
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liabl	e under or in violation of an environn	nental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of an	y release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or admin	istrative proceeding under any env	vironmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	t11: Give Details About Your Business or Co	nnections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of the following connections to an	y business?				
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, either full-time or part-time					
	☐ A member of a limited liability compan	y (LLC) or limited liability partners	hip (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing exect	utive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation							

Official Form 107

Debtor 1 Melissa L. Tempone

Debtor 1	Melissa L. Tempone	Cas	se number (if known)
	No. None of the above applies. Go to	Part 12.	
□ Y	es. Check all that apply above and fil	I in the details below for each business.	
Addr	ness Name ess er, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.
			Dates business existed
	n 2 years before you filed for bankrup utions, creditors, or other parties.	tcy, did you give a financial statement to ar	nyone about your business? Include all financial
	No Yes. Fill in the details below.		
Name Addr (Numb		Date Issued	
Part 12:	Sign Below		
are true an with a ban	nd correct. I understand that making a		declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
/s/ Melis	sa L. Tempone		
	L. Tempone of Debtor 1	Signature of Debtor 2	
Date Ju	ine 24, 2016	Date	
Did you att ■ No □ Yes	tach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
■ No		t an attorney to help you fill out bankruptcy	
	ime of Person Attach the <i>Bankri</i>	uptcy Petition Preparer's Notice, Declaration, a	aria Signaturė (Officiai Form 119).

Dobtor 1		case:		
Debtor 1	Melissa L. Tempo	one		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK	
Case number				
(if known)				Check if this is an amended filing
Official Fo				
<u>Statemer</u>	nt of Intentio	n for Individ	uals Filing Under Chapte	e <b>r 7</b> 12/15
	•	pter 7, you must fill out	this form if:	
	e claims secured by yo		union d	
ou must file thi	is form with the court wever is earlier, unless the		pired. file your bankruptcy petition or by the date se e for cause. You must also send copies to the	
	eople are filing togethe nd date the form.	r in a joint case, both ar	re equally responsible for supplying correct in	nformation. Both debtors must
Re as complete	and accurate as nossih	ale. If more snace is nee	ded, attach a separate sheet to this form. On	the top of any additional pages
	our name and case nur		ded, attach a separate sheet to this form. On	the top of any additional pages,
		ilber (il Kilowii).		
Port 1: List V		,		
	our Creditors Who Hav	e Secured Claims		
. For any credit	our Creditors Who Hav	e Secured Claims	editors Who Have Claims Secured by Property	v (Official Form 106D), fill in the
. For any credit information be	our Creditors Who Hav	e Secured Claims art 1 of Schedule D: Cre	editors Who Have Claims Secured by Property nat do you intend to do with the property that cures a debt?	
. For any credit information be Identify the cr	our Creditors Who Havors that you listed in Pelow. editor and the property t	re Secured Claims  art 1 of Schedule D: Cre that is collateral WI se	nat do you intend to do with the property that cures a debt?	Did you claim the property as exempt on Schedule C?
1. For any credit information be Identify the cr	our Creditors Who Havors that you listed in Page low.	e Secured Claims  art 1 of Schedule D: Cre that is collateral WI se	nat do you intend to do with the property that cures a debt?  Surrender the property.	Did you claim the property
Creditor's Name:	our Creditors Who Have ors that you listed in Pelow. editor and the property to the property t	e Secured Claims  art 1 of Schedule D: Cre that is collateral se	nat do you intend to do with the property that cures a debt?  Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a	Did you claim the property as exempt on Schedule C?
1. For any credit information be Identify the cr	our Creditors Who Havors that you listed in Pelow. editor and the property t	e Secured Claims  art 1 of Schedule D: Cre that is collateral  Secured Claims  WI secured Claims	nat do you intend to do with the property that cures a debt?  Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.	Did you claim the property as exempt on Schedule C?
1. For any credit information be Identify the creditor's Name:	our Creditors Who Have ors that you listed in Palelow. editor and the property the IEFCU	e Secured Claims  art 1 of Schedule D: Cre that is collateral WI se	nat do you intend to do with the property that cures a debt?  Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a	Did you claim the property as exempt on Schedule C?
1. For any credit information be Identify the cr	our Creditors Who Have ors that you listed in Pelow. editor and the property the IEFCU 2009 Honda Pilot 6	e Secured Claims  art 1 of Schedule D: Cre that is collateral  Secured Claims  With the collateral of	nat do you intend to do with the property that cures a debt?  Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	Did you claim the property as exempt on Schedule C?  □ No ■ Yes
Creditor's Name:  Description of property securing debt:	our Creditors Who Have ors that you listed in Palelow. editor and the property the IEFCU	e Secured Claims  art 1 of Schedule D: Cre that is collateral  Gas,000 miles	nat do you intend to do with the property that cures a debt?  Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:  Reaffirm  Surrender the property.	Did you claim the property as exempt on Schedule C?
Creditor's Name:  Description of property securing debt:  Creditor's Paname:	our Creditors Who Have ors that you listed in Pelow. editor and the property to the second sec	e Secured Claims  art 1 of Schedule D: Cre that is collateral  Gas,000 miles	nat do you intend to do with the property that cures a debt?  Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:  Reaffirm  Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a	Did you claim the property as exempt on Schedule C?  □ No ■ Yes
1. For any credit information be Identify the creditor's Name:  Description of property securing debt:  Creditor's Paname:  Description of	our Creditors Who Have ors that you listed in Pelow. editor and the property to the second se	art 1 of Schedule D: Creshat is collateral Wise  63,000 miles	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	Did you claim the property as exempt on Schedule C?  □ No ■ Yes
1. For any credit information be Identify the creditor's Name:  Description of property securing debt:  Creditor's Paname:	our Creditors Who Have ors that you listed in Pelow. editor and the property to IEFCU  2009 Honda Pilot 6  PHH Mortgage  1517 Rhode Avenual 11566 Nassau Communication in Period In Period In Period In Period In Period In Italian In Period In Italian In I	art 1 of Schedule D: Creshat is collateral Wise  63,000 miles	nat do you intend to do with the property that cures a debt?  Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:  Reaffirm  Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a	Did you claim the property as exempt on Schedule C?  □ No ■ Yes
Creditor's Name:  Description of property securing debt:  Creditor's Paname:  Description of property securing debt:	our Creditors Who Have ors that you listed in Pelow. editor and the property to IEFCU  2009 Honda Pilot 6  PHH Mortgage  1517 Rhode Avenual 11566 Nassau Communication in Period In Period In Period In Period In Period In Italian In Period In Italian In I	art 1 of Schedule D: Creshat is collateral  Say,000 miles  Use Merrick, NY unty	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	Did you claim the property as exempt on Schedule C?  □ No ■ Yes

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Deb	otor 1 Melissa L. Tempone	Case number (if known)
	sor's name:	□ No
	cription of leased perty:	☐ Yes
	sor's name: cription of leased	□ No
	perty:	☐ Yes
	sor's name: cription of leased	□ No
	perty:	☐ Yes
	sor's name: cription of leased	□ No
	perty:	☐ Yes
	sor's name: cription of leased	□ No
	perty:	☐ Yes
	sor's name: cription of leased	□ No
	perty:	☐ Yes
	sor's name: cription of leased	□ No
	perty:	☐ Yes
Par	3: Sign Below	
	er penalty of perjury, I declare that I have indicated my intention about ar perty that is subject to an unexpired lease.	ny property of my estate that secures a debt and any personal
X	/s/ Melissa L. Tempone X	
	Melissa L. Tempone Signature of Debtor 1	gnature of Debtor 2
	Date <b>June 24, 2016</b> Date	

=:::	and the state of t						
Fill in this inf	ormation to identify your case:			eck one box o 2A-1Supp:	nly as d	irected in this form and	d in Form
Debtor 1	Melissa L. Tempone			zA-TSupp.			
Debtor 2 (Spouse, if filing)			'	☐ 1. There is	no pres	umption of abuse	
United States	s Bankruptcy Court for the: _Eastern District of N	New York	'			o determine if a presu nade under <i>Chapter</i> 7	
Case numbe	r					icial Form 122A-2).	wearis rest
(if known)						does not apply now be service but it could ap	
<b>.</b>				☐ Check if the	nis is a	n amended filing	
	Form 122A - 1						
Chapte	r 7 Statement of Your Curr	ent Mor	nthly Inc	ome			12/15
separate sheet number (if kno military service	e and accurate as possible. If two married people are to this form. Include the line number to which the adwn). If you believe that you are exempted from a prese, complete and file Statement of Exemption from PreCalculate Your Current Monthly Income	lditional informa sumption of abu	ition applies. On se because you	the top of any do not have pri	additiona marily co	al pages, write your nam onsumer debts or becau	ne and case se of qualifying
1. What is	s your marital and filing status? Check one onl	 V.					
_	married. Fill out Column A, lines 2-11.	,					
_	ried and your spouse is filing with you. Fill out	both Columns	A and B. lines	: 2 <b>-</b> 11.			
	ried and your spouse is NOT filing with you. Y		•				
	ving in the same household and are not legal	•	•	olumns A and I	3. lines	2-11.	
	ving separately or are legally separated. Fill o	•			•		ou declare under
р	enalty of perjury that you and your spouse are leving apart for reasons that do not include evading	gally separated	d under nonbar	kruptcy law th	at appli	es or that you and you	
101(10A). F 6 months, a	verage monthly income that you received from all so or example, if you are filing on September 15, the 6-mondd the income for all 6 months and divide the total by 6. Intal property, put the income from that property in one co	th period would b	e March 1 throug Do not include an	gh August 31. If the state of t	ne amoui t more th	nt of your monthly income an once. For example, if t	varied during the
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, a coll deductions).	nd commission	ons (before	\$ 2,80	8.33	\$	
	y and maintenance payments. Do not include p	ayments from	a spouse if	\$	0.00	\$	
of you of from and and roo	ounts from any source which are regularly pai or your dependents, including child support. unmarried partner, members of your household, mmates. Include regular contributions from a spo Do not include payments you listed on line 3.	Include regular your depende	contributions nts, parents,	\$	0.00	\$	
5. Net inc	ome from operating a business, profession, o						
			tor 1				
	eceipts (before all deductions)	\$ 0.00 -\$ 0.00					
	y and necessary operating expenses		Copy here ->	\$	0.00	\$	
	nthly income from a business, profession, or farm ome from rental and other real property	1.5	copy more a	Ψ		Ψ	
6. Net inc	onie nom remai and other real property	Deb	tor 1				
Gross r	eceipts (before all deductions)	\$ 0.00					
	y and necessary operating expenses	-\$ 0.00					
	nthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
	t, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amour under the Social Security Act. Instead, list it here:	nt received was a benef	fit					
	For you\$	0.0	00_					
	For your spouse \$							
9.	<b>Pension or retirement income.</b> Do not include any ar benefit under the Social Security Act.	mount received that wa	s a	\$	0.00	\$		
10.	Income from all other sources not listed above. Sp. Do not include any benefits received under the Social received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total below.	Security Act or paymen Imanity, or international	its I or					
	Child Support			\$3	,431.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total		\$	6,239.33	+ \$		=[\$_	6,239.33
							Total o	current monthly e
Part	Determine Whether the Means Test Applies to	to You						
12.	Calculate your current monthly income for the year	Follow these steps:						
	12a. Copy your total current monthly income from line	11		Сор	y line 11 l	nere=>	\$	6,239.33
	Multiply by 12 (the number of months in a year)						<b>X</b> '	
	12b. The result is your annual income for this part of the	ne form				12b.	\$	74,871.96
13.	Calculate the median family income that applies to	you. Follow these step	os:					
	Fill in the state in which you live.	NY						
	Fill in the number of people in your household.	3						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link s		d in the sepa		13. ctions	\$	72,074.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. C Go to Part 3.	On the top of page 1, ch	eck bo	x 1, <i>There i</i> s	no presur	mption of abus	e.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	, The p	resumption (	of abuse is	determined b	y Form 1	122A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information or	n this s	tatement and	d in any at	achments is t	rue and	correct.
					·			
	X /s/ Melissa L. Tempone Melissa L. Tempone							
	Signature of Debtor 1							
	Date June 24, 2016 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file For	m 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and							

Official Form 122A-1

Melissa L. Tempone

Debtor 1

		<u> </u>
	in this information to identify your case:	Check the appropriate box as directed in lines 40 or 42:
Dec	otor 1 Melissa L. Tempone	According to the calculations required by this
	otor 2ouse, if filing)	Statement:
' '		■ 1. There is no presumption of abuse.
Uni	ted States Bankruptcy Court for the: Eastern District of New York	- D 2 There is a presumential of above
Cas	se numbersnown)	☐ 2. There is a presumption of abuse.
(11 10	mowny	☐ Check if this is an amended filing
Of	ficial Form 122A - 2	<b>3</b>
	napter 7 Means Test Calculation	04/1
To fi	ill out this form, you will need your completed copy of Chapter 7 Stateme	ment of Your Current Monthly Income (Official Form 122A-1)
101	in out this form, you will need your completed copy of chapter 7 Stateme	ment of Your Guitent Montally Income (Official Form 122A-1).
spac	as complete and accurate as possible. If two married people are filing togce is needed, attach a separate sheet to this form, Include the line numbitional pages, write your name and case number (if known).  11: Determine Your Adjusted Income	
1.	Copy your total current monthly income. Copy line 11 f	from Official Form 122A-1 here=> \$ 6,239.33
2.	Did you fill out Column B in Part 1 of Form 122A-1?	
	■ No. Fill in \$0 for the total on line 3.	
	☐ Yes. Is your spouse Filing with you?	
	□ No. Go to line 3.	
	☐ Yes. Fill in \$0 for the total on line 3.	
3.	Adjust your current monthly income by subtracting any part of your sp household expenses of you or your dependents. Follow these steps:  On line 11, Column B of Form 122A–1, was any amount of the income you	
	expenses of you or your dependents?	
	■ No. Fill in 0 for the total on line 3.	
	☐ Yes. Fill in the information below:	
	State each purpose for which the income was used	Fill in the amount you
	For example, the income is used to pay your spouse's tax debt or to	are subtracting from
	support other than you or your dependents.	your spouse's income
		\$
		_ <u> </u>
	Total.	\$ 0.00
	Total.	Copy total here=> \$ 0.00
	Adjust your overest monthly income. Others the Office the	\$ 6,239.33
4.	Adjust your current monthly income. Subtract line 3 from line 1.	<u> </u>

Official Form 122A-2

ebtor 1	Melissa L. Tempone					
art 2:	Calculate Your Deductions from Your Income					
The Ir	nternal Revenue Service (IRS) issues National and swer the questions in lines 6-15. To find the IRS stauctions for this form. This information may also be	andards, go online usi	ng the link specifi	ied in the sepai		
of you	ct the expense amounts set out in lines 6-15 regardless or actual expenses if they are higher than the standards ne in line 3 and do not deduct any operating expenses to	s. Do not deduct any am	ounts that you sub	tracted fro your	spouse's	
If you	r expenses differ from month to month, enter the avera	age expense.				
When	never this part of the from refers to you, it means both y	ou and your spouse if C	Column B of Form 1	122A-1 is filled in	in.	
5. <b>1</b>	The number of people used in determining your de	ductions from income				
p	Fill in the number of people who could be claimed as explus the number of any additional dependents whom you the number of people in your household.				3	
Natio	nal Standards You must use the IRS National	al Standards to answer t	he questions in line	es 6-7.		
	Food, clothing, and other items: Using the number o Standards, fill in the dollar amount for food, clothing, ar		line 5 and the IRS I	National	\$	1,249.00
7. <b>(</b> the property of the pro	Standards, fill in the dollar amount for food, clothing, ar Out-of-pocket health care allowance: Using the num the dollar amount for out-of-pocket health care. The nu people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the additing the standard of	nd other items.  ber of people you enterember of people is split in a higher IRS allowance	ed in line 5 and the to two categories	IRS National St -people who are	tandards, fill ir under 65 and	, , , , , , , , , , , , , , , , , , ,
7. <b>(</b> the property of the pro	Standards, fill in the dollar amount for food, clothing, ar Out-of-pocket health care allowance: Using the num the dollar amount for out-of-pocket health care. The nu- people who are 65 or olderbecause older people have	nd other items.  ber of people you enterember of people is split in a higher IRS allowance	ed in line 5 and the to two categories	IRS National St -people who are	tandards, fill ir under 65 and	
7. (the property of the proper	Standards, fill in the dollar amount for food, clothing, ar Out-of-pocket health care allowance: Using the num the dollar amount for out-of-pocket health care. The nu people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the additing the standard of	nd other items.  ber of people you enterember of people is split in a higher IRS allowance	ed in line 5 and the to two categories	IRS National St -people who are	tandards, fill ir under 65 and	
7. Ctl pr	Standards, fill in the dollar amount for food, clothing, ar Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number open who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the additional lies who are under 65 years of age	ber of people you enterember of people is split in a higher IRS allowance ional amount on line 22.	ed in line 5 and the to two categories	IRS National St -people who are	tandards, fill ir under 65 and	
7. Ctll pp h	Standards, fill in the dollar amount for food, clothing, ar Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number open house of the standard of the dollar amount, because older people have nigher than this IRS amount, you may deduct the additionable who are under 65 years of age  7a. Out-of-pocket health care allowance per person	ber of people you enterember of people is split in a higher IRS allowance ional amount on line 22.	ed in line 5 and the to two categories	IRS National St -people who are sts. If your actua	tandards, fill ir under 65 and	
7. C tl pp r	Out-of-pocket health care allowance: Using the nume the dollar amount for out-of-pocket health care. The number open before the dollar amount for out-of-pocket health care. The number of the dollar amount for out-of-pocket health care of the people have higher than this IRS amount, you may deduct the additional than the second of the se	ber of people you enterember of people is split in a higher IRS allowance ional amount on line 22.  \$	ed in line 5 and the to two categories e for health care co	IRS National St -people who are sts. If your actua	tandards, fill ir e under 65 and al expenses a	
People	Out-of-pocket health care allowance: Using the nume the dollar amount for out-of-pocket health care. The number dollar amount for out-of-pocket health care. The number dollar amount for out-of-pocket health care. The number of people who are 65 or olderbecause older people have nigher than this IRS amount, you may deduct the additing the who are under 65 years of age  7a. Out-of-pocket health care allowance per person  7b. Number of people who are under 65  7c. Subtotal. Multiply line 7a by line 7b.	ber of people you enterember of people is split in a higher IRS allowance ional amount on line 22.  \$	ed in line 5 and the to two categories e for health care co	IRS National St -people who are sts. If your actua	tandards, fill ir e under 65 and al expenses a	
People 7	Out-of-pocket health care allowance: Using the num the dollar amount for out-of-pocket health care. The number of the dollar amount for out-of-pocket health care. The number of the dollar amount for out-of-pocket health care. The number of the dollar amount for out-of-pocket health care of the additional state of the dollar amount, you may deduct the additional state of the state	ber of people you enterember of people is split in a higher IRS allowance ional amount on line 22.   \$	ed in line 5 and the to two categories e for health care co	IRS National St -people who are sts. If your actua	tandards, fill ir e under 65 and al expenses a	
People 7	Out-of-pocket health care allowance: Using the number dollar amount for out-of-pocket health care. The number dollar amount for out-of-pocket health care. The number dollar amount for out-of-pocket health care. The number dollar amount for out-of-pocket health care older people have nigher than this IRS amount, you may deduct the additing the who are under 65 years of age  7a. Out-of-pocket health care allowance per person  7b. Number of people who are under 65  7c. Subtotal. Multiply line 7a by line 7b.  1e who are 65 years of age or older  7d. Out-of-pocket health care allowance per person	ber of people you enterember of people is split in a higher IRS allowance ional amount on line 22.  \$\$  \$\$  162.00	ed in line 5 and the to two categories e for health care co	IRS National St -people who are sts. If your actual \$162	tandards, fill ir e under 65 and al expenses a	

Debtor	1	Melis	sa L.	Tempo	one								Case	number	(if know	vn)				
Lo	cal S	Standa	rds	You mu	ıst use	the IRS I	Local S	Standar	ds to ans	wer the	questio	ns in li	nes 8	-15.						
				ion fron ses into			U.S. Tr	rustee I	Program	has div	ided th	e IRS	Local	l Stand	lard f	or hou	using	for		
_		•				nce and ige or re	•	•	penses											
То	ansv	wer th	e que	stions i	n lines	8-9, use	e the U	J.S. Tru	ıstee Pro	gram ch	hart.									
						ne link sp			separate s office.	instructi	ions for	this fo	m.							
8.									expenses urance an									\$		718.00
9.	Но	ousing	and i	utilities	- Mort	gage or	rent ex	xpense	s:											
	9a.								5, fill in tenses							\$	2,72	1.00		
	9b	. Tota	al aver	rage moi	nthly pa	ayment f	or all m	nortgag	es and ot	her debt	ts secui	red by	your h	nome.						
		con	tractua	ally due	to each		d credit		it, add all ie 60 mon											
		Nan	ne of t	the credi	itor					Average paymer		hly								
		-NC	NE-							\$										
					Total	l average	e montl	hly payı	ment	\$		0.00	Co he	py re=>	-\$			0.00	Repeat this amount on line 33a.	
	9c.	. Net	mortg	gage or re	ent exp	ense.														
									<i>nt</i> ) from lir , enter \$0					\$	2,	721.0	· •	Copy here=>	\$	2,721.00
10.									sion of th s, fill in a						ng is i	incorr	ect aı	nd	\$	0.00
	E	xplain	why:																	
11.	Lo	cal tra	nspo	rtation e	expens	ses: Che	ck the	numbe	r of vehic	les for w	vhich yo	u clain	n an c	wnersh	hip or	opera	ting e	xpense		
		0. Go	to line	e 14.																
		1. Go	to line	e 12.																
		2 or m	ore. (	Go to line	e 12.															

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

308.00

\$

13.	You may	ownership or lease expense: Using the IRS Local of not claim the expense if you do not make any loan an two vehicles.					
Vel	hicle 1	Describe Vehicle 1: 2009 Honda Pilot 63,00	0 miles				
13a.	Ownersh	nip or leasing costs using IRS Local Standard		\$	471.00		
13b.	_	monthly payment for all debts secured by Vehicle 1 nclude costs for leased vehicles.					
	are cont	late the average monthly payment here and on line ractually due to each secured creditor in the 60 mon tcy. Then divide by 60.		at			
	Naı	me of each creditor for Vehicle 1	Average monthly payment				
	NE	FCU	\$ 185.93				
		Total Average Monthly Payment	\$185.93	Copy here =>	-\$185	Repeat this amount on line 33b.	
13c.		icle 1 ownership or lease expense line 13b from line 13a. if this amount is less than \$0	), enter \$0.	\$	285.07	Copy net Vehicle 1 expense here => \$	285.07
Vel	hicle 2	Describe Vehicle 2:					
13d.	Ownersh	nip or leasing costs using IRS Local Standard		\$	0.00		
13e.	Average leased v	monthly payment for all debts secured by Vehicle 2 ehicles.	. Do not include costs for	or			
	Naı	me of each creditor for Vehicle 2	Average monthly payment				
			\$				
		Total Average Monthly Payment	\$	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.		icle 2 ownership or lease expense line 13e from line 13d. if this amount is less than \$0	), enter \$0	\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.		ransportation expense: If you claimed 0 vehicles in rtation expense allowance regardless of whether you			dards, fill in the	Public \$	0.00
15.	also ded	nal public transportation expense: If you claimed luct a public transportation expense, you may fill in we more than the IRS Local Standard for <i>Public Trans</i>	what you believe is the a				0.00

Melissa L. Tempone

Debtor 1

Debtor 1 Melissa L. Tempone Case number (if known)

Oth	er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	s for	
16.	<b>Taxes:</b> The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sales, or use taxes.	\$	635.91
17.	<b>Involuntary deductions:</b> The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	<b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$_	24.00
19.	<b>Court-ordered payments:</b> The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly amount that you pay for education that is either required:  as a condition for your job, or		
	■ for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	<b>Childcare:</b> The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for any elementary or secondary school education.	\$_	540.00
22.	<b>Additional health care expenses, excluding insurance costs:</b> The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.		
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$_	0.00
23.	<b>Optional telephone and telephone services:</b> The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.		
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$_	100.00
24.	Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.	\$	6,742.98

Melissa L. Tempone Debtor 1 Case number (if known) **Additional Expense Deductions** These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. Health insurance 240.00 Disability insurance 0.00 Health savings account 0.00 240.00 240.00 Total Copy total here=> Do you actually spend this total amount? No. How much do you actually spend? \$ 26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses 0.00 may include contributions to an account of a qualified ABLE program. 26 U.S.C.§ 529A(b). 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. 0.00 By law, the court must keep the nature of these expenses confidential. 28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional 0.00 amount claimed is reasonable and necessary. 29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$160.42\* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or

public elementary or secondary school.

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

\* Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment.

30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

31. **Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial

 Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financia instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2).

32. Add all of the additional expense deductions.
Add lines 25 through 31.

+\$ 75.00

320.81

0.00

\$ 635.81

Dedu	ctions for Debt Payment									
	or debts that are secured by pans, and other secured debt		n property that you own, including	j home	mort	gages, vo	ehicle			
To		onthly payme	nt, add all amounts that are contract	tually du	e to e	each secu	ıred			
O.	Mortgages on your home:		mapley. Men ainae by ee.						verage monthly ayment	
33a.	Copy line 9b here							=> \$		00
	Loans on your first two ve							•		
33b.	-							=> \$	185.	93
33c.								=> \$	0.	00
33d.	List other secured debts:									
Name	of each creditor for other secure	d debt	Identify property that secures the deb	t		inclu	paymer de taxes ance?			
							No			
	-NONE-						Yes	\$		
-						- "	163	Φ		
							No			
							Yes	\$		
							No			
								•		
							Yes	+\$ _		—
						4	n= 00	Copy	. 40	
33e.	Total average monthly payme	nt. Add lines	33a through 33d		\$	10	85.93	here=>	. \$ 185	5.93
01	r other property necessary for No. Go to line 35.  Yes. State any amount that	you must page possession	ured by your primary residence, a port or the support of your dependence by to a creditor, in addition to the payor of your property (called the cure an armation below.	ents? ments	,					
Name	e of the creditor	Ide	entify property that secures the debt			Total cu amount	re		Monthly cure amount	
-NO	NE-				\$			÷ 60 = \$	 }	_
								_	-	
				Total	\$		0.00	Copy total here=>	. \$	0.0
			oriority tax, child support, or alimo ankruptcy case? 11 U.S.C. § 507.	ony - tha	at					
	No. Go to line 36.									
			e priority claims. Do not include curr se you listed in line 19.	ent or						

Melissa L. Tempone

Debtor 1

Debtor 1	Melis	ssa L. Tempone		Case	e number ( <i>if kno</i>	wn)		
F	or more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for Bankruptcy Bas ns for this form. Bankruptcy Basics may also be availab	s <i>ics</i> specified					
	No.	Go to line 37.						
	Yes.	Fill in the following information.						
		Projected monthly plan payment if you were filing under	er Chapter 13	3	\$			
		Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unite (for all other districts).	listricts in Ala	abama ustees	x			
		To find a list of district multipliers that includes your district link specified in the separate instructions for this for be available at the bankruptcy clerk's office.				Cop	y total	
		Average monthly administrative expense if you were fil	ing under Ch	napter 13	\$		\$	_
		of the deductions for debt payment. es 33e through 36.					\$310.93	
Total	Deduc	tions from Income						
38. <b>A</b>	dd all o	of the allowed deductions.						
		le 24, All of the expenses allowed under IRS e allowances	\$	6,742.98				
	•	e allowancese allowancese 32, All of the additional expense deductions	\$	635.81	_			
		ne 37, All of the deductions for debt payment	+\$	310.93	-			
	оору ш	is 61,7 iii of the deductione for dest paymone	Ψ	310.33	_			
		Total deductions	\$	7,689.72	Copy tot	tal here=	> \$7,689.72	_
Part 3:	Det	ermine Whether There is a Presumption of Abuse						
39. <b>C</b>	alculate	e monthly disposable income for 60 months						
;	39a. Co	py line 4, adjusted current monthly income	\$	6,239.33	_			
;	39b. Co	py line 38, Total deductions	- \$	7,689.72				
;		onthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$	-1,450.39	Copy here=>\$	·	1,450.39	
ı	For the	next 60 months (5 years)				x 60		
								7
;	39d. <b>To</b>	tal. Multiply line 39c by 60	39d.	\$	87,023.40	Copy here=>	\$87,023.40	
40. <b>F</b>	ind out	whether there is a presumption of abuse. Check the	box that app	olies:				J
	The li	ine 39d is less than \$7,700*. On the top of page 1 of the	nis form, che	ck box 1, The	ere is no pre	esumption of a	buse. Go to Part 5.	
		ine 39d is more than \$12,850*. On the top of page 1 o 4 if you claim special circumstances. Go to Part 5.	f this form, c	heck box 2,	There is a p	resumption of	abuse. You may fill out	
	The li	ine 39d is at least \$7,700*, but not more than \$12,85	<b>0*.</b> Go to line	e 41.				
*(		to adjustment on 4/01/19, and every 3 years after that fo			he date of a	adjustment.		

Debtor 1	Meli	ssa L. Tempone	Case number (if known)	
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled a Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.		
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i) Multiply line 41a by 0.25	`'	Copy here=> \$
25	5% of y	ne whether the income you have left over after subtracting all allowed do your unsecured, nonpriority debt.  the box that applies:		,
		<b>39d is less than line 41b.</b> On the top of page 1 of this form, check box 1, <i>Th</i> p Part 5.	nere is no presumption of ab	use.
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 of this form, ch <i>umption of abuse.</i> You may fill out Part 4 if you claim special circumstances.		
Part 4:	Giv	ve Details About Special Circumstances		
_	res. Fil ea Yo ne	to to Part 5.  I in the following information. All figures should reflect your average monthly each item. You may include expenses you listed in line 25.  Ou must give a detailed explanation of the special circumstances that make the ecessary and reasonable. You must also give your case trustee documentation ligustments.	e expenses or income adjus	tments
	G		Average monthly expense or income adjustment	
			\$	
			\$	_
			\$	_
	_		\$	_
Part 5:	Sig	gn Below		_
	_	gning here, I declare under penalty of perjury that the information on this state	ement and in any attachmen	ts is true and correct.
	χ /s	/ Melissa L. Tempone		
	M	elissa L. Tempone gnature of Debtor 1		
Da	ate <b>J</b> ι	Ine 24, 2016 M / DD / YYYY		

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Eastern District of New York

T		in District of New 10		_	
In r	Melissa L. Tempone	Debtor(s)	Case N Chapter		
			_		
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR I	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankrupto	y, or agreed to be pa	aid to me, for servi	
	For legal services, I have agreed to accept		\$	1,250.00	
	Prior to the filing of this statement I have received		\$	1,165.00	
	Balance Due			85.00	
2.	\$335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed comper	sation with any other perso	n unless they are me	embers and associa	ites of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				my law firm. A
6.	In return for the above-disclosed fee, I have agreed to rend	der legal service for all aspe	cts of the bankrupto	y case, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and renderi</li> <li>b. Preparation and filing of any petition, schedules, staten</li> <li>c. Representation of the debtor at the meeting of creditors</li> <li>d. [Other provisions as needed]</li> <li>Exemption planning; preparation and filing</li> </ul>	nent of affairs and plan whi and confirmation hearing,	ch may be required; and any adjourned	nearings thereof;	
7.	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any disc any other adversary proceeding.			nces, relief fron	n stay actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	agreement or arrangement for	or payment to me fo	r representation of	the debtor(s) in
_	June 24, 2016	/s/ Cooper J Ma			
1	Date	Cooper J Macco Signature of Attor Macco and Ster 2950 Express D Suite 109 Islandia, NY 117	ney n, LLP rive South 749	_	
		Name of law firm	Fax: 631-549-784	<b>)</b>	
		oj van juni			

## **United States Bankruptcy Court Eastern District of New York**

In re	Melissa L. Tempone		Case No.	
		Debtor(s)	Chapter	7

### **VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date:	June 24, 2016	/s/ Melissa L. Tempone
		Melissa L. Tempone
		Signature of Debtor
Date:	June 24, 2016	/s/ Cooper J Macco
		Signature of Attorney
		Cooper J Macco
		Macco and Stern, LLP
		2950 Express Drive South
		Suite 109
		Islandia, NY 11749
		631-549-7900 Fax: 631-549-7845

USBC-44 Rev. 9/17/98

Amazon/Synchrony Bank PO Box 960013 Orlando, FL 32896-0013

American Education Services Payment Center Harrisburg, PA 17130-0001

American Express PO Box 1270 Newark, NJ 07101-1270

Bank of America PO Box 15019 Wilmington, DE 19886-5019

Barclaycard Card Services PO Box 13337 Philadelphia, PA 19101-3337

Bechtle & Murphy 300 Garden City Plaza Suite 314 Garden City, NY 11530

Capital One PO Box 71083 Charlotte, NC 28272-1083

Citi Cards PO Box 6004 Sioux Falls, SD 57117-6004

Gap/Synchrony Bank PO Box 530942 Atlanta, GA 30353-0942

Internal Revenue Service PO Box 219690 Kansas City, MO 64121-9690

NEFCU 1000 Corporate Drive PO Box 9003 Westbury, NY 11590-9003

NEFCU/Visa PO Box 37603 Philadelphia, PA 19101-0603

PHH Mortgage 1 Mortgage Way Mount Laurel, NJ 08054

Slate from Chase Cardmember Service PO Box 15153 Wilmington, DE 19886

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

# STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

<b>DEBTOR(S):</b>	Melissa L. Tempone	CASE NO.:.
		(b), the debtor (or any other petitioner) hereby makes the following disclosure lowledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before thes; (iii) are affiliates, as defined or more of its general partners;	purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a (vi) are partnerships which share one or more common general partners; or (vii) ither of the Related Cases had, an interest in property that was or is included in the later than the later tha
■ NO RELATED	CASE IS PENDING OR HAS E	BEEN PENDING AT ANY TIME.
☐ THE FOLLOW	NG RELATED CASE(S) IS PE	ENDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:
CURRENT STATI	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (A	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:
CURRENT STATI	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (1	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE: (Discharge	d/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE a	
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("RESCHEDULE "A" OF RELATED CASE:	
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals who have be eligible to be debtors. Such an individual will be required to file	
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY	Y, AS APPLICABLE:
I am admitted to practice in the Eastern District of New York (Y/N):	: <u> </u>
CERTIFICATION (to be signed by pro se debtor/petitioner or debtor.  I certify under penalty of perjury that the within bankruptcy case is not as indicated elsewhere on this form.  /s/ Cooper J Macco	
Cooper J Macco Signature of Debtor's Attorney Macco and Stern, LLP 2950 Express Drive South	Signature of Pro Se Debtor/Petitioner
Suite 109 Islandia, NY 11749 631-549-7900 Fax:631-549-7845	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009